

Hike for Hospice



Office Use:
Pd _____
Ch # _____
Shirt? _____

Sunday, April 29, 2018

3 Mile Hike (walk/run) at 3pm beginning and ending at Merchants National Bank, *Rain or Shine!*

All proceeds benefit Ohio's Hospice of Fayette County patients and their families!

\$10 registration, all ages

Fee includes event t-shirt & pizza and drink following event

Pre-Registration: April 1 through April 27

Create a hike team! See back for details.

Proudly sponsored by:



Please send or drop off cash/check (payable to Ohio's Hospice of Fayette County) with registration form to:

Ohio's Hospice of Fayette County, 222 N Oakland Ave., Washington CH, OH 43160

Name _____ Phone _____

Address _____ Email _____

Team Name (If Applicable) _____ Shirt Size (YS-3XL) _____

Waiver/Publicity Release: I know that walking/running a road race is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained. I agree to abide by any decisions of a race official relative to my ability to safely complete the run. I assume all risk associated with running in this event. Having read this waiver and knowing these facts, I, for myself and anyone entitled to act on my behalf, waive and release all sponsors involved in the Ohio's Hospice of Fayette County Hike for Hospice, from all claims or liabilities of any kind, even though that liability may arise out of negligence or carelessness on the part of the parties involved with the hike. Additionally, I give permission for my name and other press release/story information, as well as my photograph, to be used in any Ohio's Hospice of Fayette County publication or in any other outside publication deemed suitable for the purpose of promoting the mission of Ohio's Hospice of Fayette County. I recognize that there will be no compensation for the use of my information or photograph.

Signature (signature of parent/guardian if under 18 years old) & Date

Hike Registration Information

- Hike will be held on Sunday, April 29th at 3pm beginning and ending at:
 - Merchants National Bank, 128 S. North St., Washington CH, OH 43160
- Registration form must accompany registration fee – drop off or mail in to:
 - Hospice of Fayette County, 222 N. Oakland, Washington CH, OH 43160
- Mail registrants can pick up shirts on day of event beginning at 2pm
- Participants who have pre-registered please arrive at 2:30pm
- Participants who have NOT pre-registered please arrive at 2pm for registration, day of registrants *will not be provided* with event t-shirt; **additional shirts will not be available to purchase the day of hike**
- At 2:45pm a participant group photo will be taken
- Bikes, pets on leashes, strollers, wagons, runners, and walkers are all welcome
- All hikers, competitive or noncompetitive, are encouraged to obtain donations for their participation in this annual event; donations can be used to pay for registration fees
- Walking is optional if person only wants to make donation and receive t-shirt

Note - All proceeds are used for patient care and supplies at Ohio's Hospice of Fayette County

Competitive Classes - Awards Are Given For The Following Events:

- **Most Hikers/Group** – team with the most participants
- **Most Hikers/Youth** - youth team with the most participants
- **Most Donations/Individual** - individual with the most donations
- **Most Donations/Team** – team with the most donations
- **Most Donations/Corporate** – corporate team with the most donations

Team Information

- All teams must have a team captain, appointed by their team; *team captains* can contact Ohio's Hospice of Fayette County to receive an additional worksheet for recording team activity
- All team members must fill out, sign and return event registration form along with payment by April 25; forms can be returned by member or team captain

Note – Donations must be turned in by **Wednesday, April 25** to be counted toward your final standing. Additional donations on day of event will be accepted but not totaled into your competitive amount.

“Memory Walk Down Memory Lane” Information

- Personalized sign with your loved one's name (in honor or in memory of)
- Hike route includes Community Drive, where signs with loved one's names will be placed
- \$6.00 donation to Ohio's Hospice of Fayette County per memory name
- Deadline for memory sign orders is April 23, 2018
- Orders can be placed at the Ohio's Hospice of Fayette County office or sent by mail to:
- Ohio's Hospice of Fayette County, 222 N. Oakland Ave., Washington CH, OH 43160

For more information please call 740-335-0149.

Find us online at www.hospice-fayco.org and Facebook

“Memory Walk Down Memory Lane”

Hike for Hospice 2018

On behalf of the sponsors for Hike for Hospice 2018, we want to invite you to participate in the annual “Memory Walk down Memory Lane”.

On Sunday April 29, 2018 at 3:00pm the annual event, Hike for Hospice, will include a “Memory Walk” down Community Drive, in front of Grace Community Church, that is part of the Hike route. This is your opportunity to honor or memorialize your family, friends, and loved ones special to you.

The sign will be personalized with your loved one’s name and Hike for Hospice committee members will place the sign along Community Drive for all the Hikers to see as they pass by. Following the Hike, we encourage you to take the Memory sign home to share with your family. We do ask that the signs are left in place during the event. Following the event, you’re able to pick them up at the registration table or even the following week at the Ohio’s Hospice of Fayette County office.

To place a Memory sign along Memory Lane, we request a \$6.00 donation per name. The deadline to order your loving sign is April 23, 2018. Your order can be placed at the office of Hospice of Fayette County. Please note that you do not have to participate in the Hike to purchase a memory sign.

We look forward to seeing you April 29th, rain or shine. For more information contact Ohio’s Hospice of Fayette County at 740-335-0149 or visit www.hospice-fayco.org.

Memory Walk Signs

In Memory of or In Honor of *(Please Circle)* _____ **In**

Memory of or In Honor of *(Please Circle)* _____ **In**

Memory of or In Honor of *(Please Circle)* _____ **In**

Memory of or In Honor of *(Please Circle)* _____

\$6 Donation Per Name _____ x \$6 = \$ _____

Donation Amount Enclosed \$ _____

Please return cash or check, payable to Ohio's Hospice of Fayette County, with form to:

Ohio's Hospice of Fayette County

222 N. Oakland Ave.

Washington CH, OH 43160

Thank you for supporting the patients of Ohio's Hospice of Fayette County